## PART B - FEE(S) TRANSMITTAL

Complete and mai	I this form, togethe	r with applicable fee(s), to
------------------	----------------------	------------------------------

Box ISSUE FEE Assistant Commissioner for Patents Washington, D.C. 20231

CURRENT CORRESPONDE	NCE ADDRESS (	Note: Legibly m	erk-up with any corrections	or use Blo	ck I)	Note: The certificate mailings of the Fee(s	of mailing	below can onl	ly be used for dom te cannot be used for
26646	7590	04/22/200	02			other accompanying por formal drawing, mi	papers. Each	additional pape	er, such as an assigni
KENYON & K		6	IPE		•	or tornial drawing, mi			manng.
ONE BROADW			4		1	hereby certify that	this Fee(s)	ate of Mailing Transmittal is b	being deposited with
NEW YORK, NY	Y 10004	ľ	3/			United States Postal S envelope addressed	ervice with a	sufficient postag	e for thist chass mail i
			1 6 2002			indicated below.	w the box	15500 100 400	ness above on the
		13	<b>Æ</b> /			Thomas F	. Meagh	er /	(Depositor's
(A)	(B)	a set e			Thom	~ 777	Usite	(Sig	
		6	TRADEN			7/11/02	,		
			RUFE						
APPLICATION NO.	FILI	NG DITT		FIRST	NAMED INVENTO	OR .		DOCKET NO.	CONFIRMATION N
09/449,801	ORG. ST.	41999			HEN R. FORRES	AN EXCITON BLO		1/50101	6720
TOTAL CLAIMS 24	APPLN. T		SMALL ENTITY YES		ISSUE FEE \$640	PUBLICATION FE	E TOT.	AL FEE(S) DUE \$640	07/22/2002
	(D)		APTIBUT		CLASS-SUBCLA	ee ]			
	MINER	ee.	ART UNIT		428-690000				
YAMNITZKY	, MARIE RO	3E	1774		420-03000				
but not required.	O form(s) and	Customer N		ided,	the names of up or agents OR, al single firm (hav	n the patent front pa to 3 registered paten Itematively, (2) the ing as a member a	t attorneys name of a registered	ı_Kenyon	a & Kenyon
CFR 1.563). Use of PTC but not required.  Change of correspon Address form PTO/SB  "Fee Address" indic PTO/SB/47) attached.	O form(s) and ndence addres V122) attached	Customer No es (or Change d.	of Correspondence	ided,	the names of up or agents OR, al single firm (hav- attorney or agen	to 3 registered patent ternatively, (2) the ing as a member a at) and the names of attorneys or agents. I	t attorneys name of a registered f up to 2	1_Kenyon 2 3	& Kenyon
U Change of correspon Address form PTO/SB U "Fee Address" indic PTO/SB/47) attached.	o form(s) and adence addres (122) attached attion (or "Fee	Customer No is (or Change d. : Address" In	umber are recommen of Correspondence	ided,	the names of up or agents OR, al single firm (hav- attorney or agen registered patent is listed, no name	to 3 registered patent ternatively, (2) the sing as a member a nt) and the names o attorneys or agents. I will be printed.	t attorneys name of a registered f up to 2	ı_Kenyon 2 3	& Kenyon
O Change of correspon Address form PTO/SB O "Fee Address" indic PTO/SB/47) attached.  ASSIGNEE NAME AI PUT EASE NOTE: Unless	of form(s) and address v122) attached a	Customer Ni s (or Change d. Address" In	of Correspondence dication form	N THE P	the names of up or agents OR, al single firm (hav attorney or agen registered patent is listed, no name ATENT (print or	to 3 registered patenternatively, (2) the ting as a member at the names of attorneys or agents. I will be printed.  type)	t attorneys name of a registered f up to 2 if no name	23only appropriate	e when an assignmen
U Change of correspon Address form PTO/SB U "Fee Address" indic PTO/SB/47) attached.	of form(s) and odence addres V122) attached atton (or "Fee ND RESIDEN an assignee and to the USP	Customer Ni s (or Change d. Address" In	of Correspondence dication form  TO BE PRINTED OF below, no assignee of guarantee of the surface	N THE P	the names of up or agents OR, as single firm (hav attorney or agen registered patent is listed, no name ATENT (print or appear on the pa over. Completion	to 3 registered patenternatively, (2) the ting as a member at the names of attorneys or agents. I will be printed.  type)	t attorneys name of a registered f up to 2 f no name  gnee data is a substitute fo	23only appropriate	e when an assignmen
Dut not required.  Change of correspondedress form PTO/SB  "Fee Address" indic PTO/SB/47) attached.  ASSIGNEE NAME AT PLEASE NOTE: Unlesseen previously submitt  (A) NAME OF ASSIGN	of denne address (122) attached attache	Customer No as (or Change d. Address" In ICE DATA 7 is identified TO or is bein	of Correspondence dication form  TO BE PRINTED OF below, no assignee and submitted under second control of the	N THE P data will eparate c (B) RES	the names of up or agents OR, at single firm (has attorney or agent registered patent is listed, no name ATENT (print or appear on the pa over. Completion IDENCE: (CITY	to 3 registered patenternatively, (2) the ting as a member at the names of attorneys or agents. I will be printed.  type) tent. Inclusion of assi of this form is NOT a	t attorneys name of a registered f up to 2 if no name  ignee data is a substitute fo	23only appropriate	e when an assignmen
Dut not required.  Change of correspondedress form PTO/SB  Tee Address indic PTO/SB/47) attached.  ASSIGNEE NAME AT PLEASE NOTE: Unlessed previously submitted (A) NAME OF ASSIGN	of denne address (122) attached attache	Customer No as (or Change d. Address" In ICE DATA 7 is identified TO or is bein	of Correspondence dication form  TO BE PRINTED OF below, no assignee of guarantee of the surface	N THE P data will eparate c (B) RES	the names of up or agents OR, at single firm (has attorney or agent registered patent is listed, no name ATENT (print or appear on the pa over. Completion IDENCE: (CITY	to 3 registered patent ternatively, (2) the sing as a member a t) and the names o attorneys or agents. I will be printed. type) tent. Inclusion of assi of this form is NOT a and STATE OR COU	t attorneys name of a registered f up to 2 if no name  ignee data is a substitute fo	23only appropriate	e when an assignmen
but not required.  O Change of correspondedress form PTO/SB O "Fee Address" indic PTO/SB/47) attached.  ASSIGNEE NAME AI PLEASE NOTE: Unless been previously submitt (A) NAME OF ASSIGN The Trusted	of form(s) and address address (V122) attached a	Customer No.  s (or Change d. Address" In  ICE DATA 1 is identified TO or is bein	of Correspondence dication form  TO BE PRINTED Of below, no assignee and submitted under second to the control of the control	N THE P data will eparate c (B) RES	the names of up or agents OR, as single firm (hav attorney or agent registered patent is listed, no name ATENT (print or appear on the pasover. Completion IDENCE: (CITY	to 3 registered patenternatively, (2) the ting as a member at the names of attorneys or agents. I will be printed.  type) tent. Inclusion of assis of this form is NOT and STATE OR COUCETON, New	t attorneys name of a registered f up to 2 f no name  genee data is a substitute fo NTRY)  Jersey	2 3 only appropriate or filing an assig	e when an assignment
but not required.  O Change of correspondedress form PTO/SB O "Fee Address" indic PTO/SB/47) attached.  ASSIGNEE NAME AI PLEASE NOTE: Unless been previously submitt (A) NAME OF ASSIGN The Trusted	of form(s) and address address (V122) attached a	Customer No.  s (or Change d. Address" In  ICE DATA 1 is identified TO or is bein	of Correspondence dication form  TO BE PRINTED OR below, no assignee and submitted under submi	N THE P data will eparate c (B) RES	the names of up or agents OR, as single firm (hav attorney or agen registered patent is listed, no name  ATENT (print or appear on the patent in the patent)	to 3 registered patenternatively, (2) the ting as a member at the names of attorneys or agents. I will be printed.  type) tent. Inclusion of assis of this form is NOT and STATE OR COUCETON, New	t attorneys name of a registered f up to 2 f no name  genee data is a substitute fo NTRY)  Jersey	2 3 only appropriate or filing an assig	e when an assignmen
but not required.  Q Change of correspondedress form PTO/SB Q "Fee Address" indic PTO/SB/47) attached.  ASSIGNEE NAME AI PLEASE NOTE: Unlesseen previously submitted (A) NAME OF ASSIGNTHE Trusteen Previously submitted (A) NAME OF ASSIGNTHE (A) NAME OF ASSIG	of form(s) and address address v/122) attached attion (or "Fee ND RESIDEN is an assignee and to the USP NEE es of P.	Customer No.  s (or Change d. Address" In  ICE DATA 1 is identified TO or is bein	of Correspondence dication form  TO BE PRINTED OR below, no assignee and submitted under submi	N THE P data will eparate c (B) RES	the names of up or agents OR, as single firm (hav attorney or agen registered patent is listed, no name  ATENT (print or appear on the paover. Completion IDENCE: (CITY  Print on the patent)  nent of Fee(s):	to 3 registered patenternatively, (2) the ting as a member a (t) and the names of attorneys or agents. I will be printed.  Type)  tent. Inclusion of assi of this form is NOT and STATE OR COUCETON, New	t attorneys name of a registered of up to 2 of no name  ignee data is a substitute fo NTRY)  Jersey  orporation of	2 3 only appropriate or filing an assig	e when an assignment
but not required.  O Change of correspondedress form PTO/SB O "Fee Address" indic PTO/SB/47) attached.  ASSIGNEE NAME AI PLEASE NOTE: Unlessed previously submitted (A) NAME OF ASSIGNATION Trusted the second properties.  The Trusted the second properties.  The following fee(s) at the second properties.	of form(s) and address address v/122) attached attion (or "Fee ND RESIDEN is an assignee and to the USP NEE es of P.	Customer No.  s (or Change d. Address" In  ICE DATA 1 is identified TO or is bein	of Correspondence dication form  TO BE PRINTED OF below, no assignee on submitted under some University of Correspondence (will not be	N THE P data will eparate c (B) RES ty	the names of up or agents OR, as single firm (hav attorney or agent registered patent is listed, no name  ATENT (print or appear on the patent of the patent)  On the patent)  nent of Fee(s):  ck in the amount of	to 3 registered patenternatively, (2) the ting as a member a at the names of attorneys or agents. I will be printed.  Type)  tent. Inclusion of assist of this form is NOT a and STATE OR COUCETON, New	t attorneys name of a register a	2 3 only appropriate or filing an assig	e when an assignment
but not required.  O Change of correspondedress form PTO/SB O "Fee Address" indic PTO/SB/47) attached.  ASSIGNEE NAME AI PLEASE NOTE: Unlessed previously submitted (A) NAME OF ASSIGNATION Trusted the second properties.  The Trusted the second properties.  The following fee(s) at the second properties.	of form(s) and  addence address V122) attached a	Customer Notes (or Change d. ) Address" In ICE DATA 1 is identified TO or is being the control of the control o	of Correspondence dication form  TO BE PRINTED OR below, no assignee ag submitted under so the correspondence on University attegories (will not be	N THE P data will eparate c (B) RES ty printed 4b. Payn	the names of up or agents OR, as single firm (have attorney or agent registered patent is listed, no name ATENT (print or appear on the patent)  On the patent)  On the patent)  nent of Fee(s):  ck in the amount cent by credit card.	to 3 registered patenternatively, (2) the ting as a member a at the names of attorneys or agents. I will be printed.  type) thent. Inclusion of assis of this form is NOT a and STATE OR COUCETON, New  individual Section of the fee(s) is enclosed.	t attorneys name of a register a register a register a f up to 2 f no name  genee data is a substitute fe NTRY)  Jersey  orporation or  ad. attached.	2	e when an assignment mment.
but not required.  O Change of correspondedress form PTO/SB O "Fee Address" indic PTO/SB/47) attached.  ASSIGNEE NAME AI PLEASE NOTE: Unlesseen previously submitt (A) NAME OF ASSIGN The Trusteen Please check the appropri	of form(s) and addrace address V122) attached at	Customer No.  s (or Change d. Address" In  ICE DATA 1 is identified TO or is bein	of Correspondence dication form  TO BE PRINTED OR below, no assignee ag submitted under so the correspondence on University attegories (will not be	N THE P data will eparate c (B) RES ty printed 4b. Payn	the names of up or agents OR, as single firm (have attorney or agent registered patent is listed, no name ATENT (print or appear on the patent)  On the patent)  On the patent)  nent of Fee(s):  ck in the amount cent by credit card.	to 3 registered patenternatively, (2) the ting as a member a at the names of attorneys or agents. I will be printed.  Type)  tent. Inclusion of assist of this form is NOT a and STATE OR COUCETON, New	t attorneys name of a register a register a register a f up to 2 f no name  genee data is a substitute fe NTRY)  Jersey  orporation or  ad. attached.	2	e when an assignment mment.
but not required.  O Change of correspondedress form PTO/SB O "Fee Address" indic PTO/SB/47) attached.  ASSIGNEE NAME AF PLEASE NOTE: Unlesseen previously submitted (A) NAME OF ASSIGNATION The Trusted Please check the appropriate. The following fee(s) so the publication Fee  Madvance Order - # of the COMMISSIONER C	of form(s) and adence address V122) attached atton (or "Fee ND RESIDEN s an assignee ed to the USP NEE es of P. attached are enclosed:	Customer Notes (or Change of the Address" In ICE DATA 1 is identified TO or is being the Customer of the Custo	of Correspondence dication form  TO BE PRINTED OF below, no assignee on submitted under some University attegories (will not be DEMARKS is requested.)	N THE P data will eparate c (B) RES	the names of up or agents OR, as single firm (hav attorney or agent registered patent is listed, no name ATENT (print or appear on the patent of the patent).  Print on the patent)  nent of Fee(s): ck in the amount of the patent by credit card.  commissioner is be Account Number	to 3 registered patenternatively, (2) the ting as a member a at a member a strong and the names of attorneys or agents. I will be printed.  Type)  tent. Inclusion of assist of this form is NOT a and STATE OR COU.  Ceton, New  individual the printed are the printed at a country and state of the fee(s) is enclose.  Form PTO-2038 is a strepty authorized by city.	t attorneys name of a name of a register a register a register a register a fup to 2 f no name  genee data is a substitute fi NTRY)  Jersey  orporation of d.  attached.  harge the requesclose an ex	only appropriate or filing an assig  other private gr  uired foe(s), or c  tra copy of this f	roup entity govern
but not required.  Q Change of correspond Address form PTO/SB Q "Fee Address" indic PTO/SB/47) attached.  ASSIGNEE NAME AT PLEASE NOTE: Unless been previously submitted (A) NAME OF ASSIGNATION The Trusted Please check the appropriate. The following fee(s) at publication Fee	of form(s) and adence address V122) attached atton (or "Fee ND RESIDEN s an assignee ed to the USP NEE es of P. attached are enclosed:	Customer Notes (or Change of the Address" In ICE DATA 1 is identified TO or is being the Customer of the Custo	of Correspondence dication form  TO BE PRINTED OF below, no assignee on submitted under some University attegories (will not be DEMARKS is requested.)	N THE P data will eparate c (B) RES	the names of up or agents OR, as single firm (have attorney or agent registered patent is listed, no name ATENT (print or appear on the pasover. Completion IDENCE: (CITY Print on the patent) on the patent) on the patent) the patent of Fee(s): ck in the amount of the commissioner is by Account Number ply the Issue Fee	to 3 registered patenternatively, (2) the ting as a member a at a member a strong and the names of attorneys or agents. I will be printed.  Type)  tent. Inclusion of assist of this form is NOT a and STATE OR COU.  Ceton, New  individual the printed are the printed at a country and state of the fee(s) is enclose.  Form PTO-2038 is a strepty authorized by city.	t attorneys name of a name of a register a register a register a register a fup to 2 f no name  genee data is a substitute fi NTRY)  Jersey  orporation of d.  attached.  harge the requesclose an ex	only appropriate or filing an assig  other private gr  uired foe(s), or c  tra copy of this f	roup entity govern
Dut not required.  Change of correspond Address form PTO/SB  Tee Address indic PTO/SB/47) attached.  ASSIGNEE NAME AF PLEASE NOTE: Unless been previously submitted (A) NAME OF ASSIGNATION THE Trusted Please check the appropriate. The Trusted Please check the appropriate. The following fee(s) so publication Fee  Advance Order - # of the COMMISSIONER Complication identified about Authorized Signature)	of form(s) and adence address V122) attached atton (or "Fee ND RESIDEN s an assignee ed to the USP NEE es of P. attached are enclosed:	Customer Notes (or Change of d. )  Address" In ICE DATA 1 is identified TO or is being range of the category or ca	of Correspondence dication form  TO BE PRINTED OR below, no assignee and submitted under so the correspondence will not be attegories (will not be correspondence).	N THE P data will eparate c (B) RES	the names of up or agents OR, as single firm (hav attorney or agent registered patent is listed, no name ATENT (print or appear on the patent of the patent).  Print on the patent)  nent of Fee(s): ck in the amount of the patent by credit card.  commissioner is be Account Number	to 3 registered patenternatively, (2) the ting as a member a (1) and the names of attorneys or agents. I will be printed.  Type)  tent. Inclusion of assist of this form is NOT a and STATE OR COUCETON, New individual the printed of the fee(s) is enclosed. Form PTO-2038 is a sereby authorized by claim of Publication Fee (1) and Publication Fee (1)	t attorneys name of a registered f up to 2 f no name  ignee data is a substitute fo NTRY)  Jersey  orporation of d.  ittached harde the requestered f any) or to a	only appropriate or filing an assig  other private gr  uired fee(s), or c tra copy of this i	roup entity  government.
but not required.  Change of correspondedress form PTO/SB TFee Address" indic PTO/SB/47) attached.  ASSIGNEE NAME AF PLEASE NOTE: Unless been previously submitted (A) NAME OF ASSIGNATION THE Trusted Please check the appropriate. The Trusted Please check the appropriate. The following fee(s) is publication Fee Advance Order - # of the COMMISSIONER Complication identified about Authorized Signature)	of form(s) and  addence address V122) attached a	Customer No. 29  And TRAI  AND TRAI  No. 29  On Fee 21  And Customer No. 29  And Automore No. 20  And Automore No. 20  And Automore No. 20  And Automore No.	umber are recommen of Correspondence dication form TO BE PRINTED OF below, no assignee of g submitted under se on Universi ategories (will not be present to the session of	N THE P data will eparate c (B) RES ty eprinted 4b. Paymon M The C Deposit med to ap	the names of up or agents OR, as single firm (have attorney or agents or agents or agents or agents or agents or agent or the pasover. Completion IDENCE: (CITY Print or the patent) on the patent) or the amount of Fee(s): ck in the amount of commissioner is haccount Number of the patent of th	to 3 registered patenternatively, (2) the time as a member a at a member a at a member a strong and the names of attorneys or agents. I will be printed.  Type)  tent. Inclusion of assis of this form is NOT a and STATE OR COU.  Ceton, New  individual Eye of the fee(s) is enclose.  Form PTO-2038 is a surely authorized by classification Fee (in the fee (i	t attorneys name of a name of a registered f up to 2 if no name  genee data is a substitute fi NTRY)  Jersey  orporation or  d.  attached.  harge the requireless an ex- if any) or to i	only appropriate or filing an assign other private grant copy of this incapply any pre-	roup entity  government.
Dut not required.  Q Change of correspondedress form PTO/SB Q "Fee Address" indice PTO/SB/47) attached.  ASSIGNEE NAME AI PLEASE NOTE: Unless been previously submitt (A) NAME OF ASSIGN  The Trusted Please check the appropria  a. The following fee(s) s  M Issue Fee Q Publication Fee Advance Order - # of  The COMMISSIONER Complication identified about Authorized Signature (MASSIGNER Complication identified about Authorized Signature)  OTHES F. Meaghe NOTE: The Issue Fee other than the applicar interest as shown by the	of form(s) and  adence address V122) attached atton (or "Fee  ND RESIDEN s an assignee ed to the USP NEE  es of P.  and enclosed:  T (Reg. and Publication; a registere records of the	Customer Notes (or Change of Address" In ICE DATA 1 is identified TO or is being the control of	of Correspondence dication form  TO BE PRINTED OF below, no assignee on g submitted under some confidence of the confide	N THE P data will eparate c (B) RES  ty  printed 4b. Paym A che Paymon The C Deposit med to ap	the names of up or agents OR, as single firm (have attorney or agent registered patent is listed, no name attent (print or appear on the patent). The patent of the patent on the patent on the patent on the patent) on the patent of th	to 3 registered patenternatively, (2) the time as a member a (1) and the names of attorneys or agents. I will be printed.  type) tent. Inclusion of assis of this form is NOT a and STATE OR COUCETON, New individual the individual that is not be a considered by the fee(s) is enclose. Form PTO-2038 is a creby authorized by claim of the fee(s) is enclosed and Publication Fee (1)	t attorneys name of a name of a registered f up to 2 if no name  genee data is a substitute fi NTRY)  Jersey  orporation or  d.  attached.  harge the requireless an ex- if any) or to i	only appropriate or filing an assign other private grant copy of this fore-apply any pre-	roup entity  government.
but not required.  Change of correspondedress form PTO/SB Tee Address indic PTO/SB/47) attached.  ASSIGNEE NAME AI PLEASE NOTE: Unless been previously submitt (A) NAME OF ASSIGN The Trusted  Clease check the appropria.  The following fee(s) at the community of	of form(s) and  adence address V122) attached attached attached ND RESIDEN S an assignee ed to the USP NEE es of P.  attached attached are enclosed:  f Copies  F Reg.  and Publication attached attached are records of the This form is of the individe should be sen Weshington, UDRESS. St DDRESS. ST DDRESS. ST	Customer Notes (or Change of Address" In ICE DATA 1 is identified TO or is being the Company of	of Correspondence dication form  TO BE PRINTED OR below, no assignee ag submitted under so the control of the c	N THE P data will eparate c (B) RES  ty  printed 4b. Paym A che Paymon The C Deposit med to ap	the names of up or agents OR, as single firm (have attorney or agent registered patent is listed, no name attent (print or appear on the patent). The patent of the patent on the patent on the patent on the patent) on the patent of th	to 3 registered patenternatively, (2) the time as a member a at a member a at a member a strong and the names of attorneys or agents. I will be printed.  Type)  tent. Inclusion of assis of this form is NOT a and STATE OR COU.  Ceton, New  individual Eye of the fee(s) is enclose.  Form PTO-2038 is a surely authorized by classification Fee (in the fee (i	t attorneys name of a name of a registered f up to 2 if no name  genee data is a substitute fi NTRY)  Jersey  orporation or  d.  attached.  harge the requireless an ex- if any) or to i	only appropriate or filing an assign other private grant copy of this incapply any pre-	roup entity  government.

TRANSMIT THIS FORM WITH FEE(S)

PTOL-85 (REV. 07-01) Approved for use through 01/31/2004. OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE